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CONFIRMATION NO. 5745

SERIAL NUMBER	FILING OR 371(c) DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
10/705,472	11/10/2003 RULE	623	3733	CERA-231.2-CONT
<b>APPLICANTS</b> Hans-Werner Boumann, Heidelberg, GERMANY; Hans-Georg Pfaff, Ostfildern, GERMANY; Gontran Sennwald, Gallen, SWITZERLAND; Markus Schwarz, Ebenhausen, GERMANY;				
<b>** CONTINUING DATA *****</b> This application is a CON of 09/960,624 09/21/2001 ABN <i>YES PR.</i>				
<b>** FOREIGN APPLICATIONS *****</b> GERMANY 100 47 033.5 09/22/2000 <i>YES PR.</i> GERMANY 101 43 865.6 09/07/2001				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 02/17/2004</b>				
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged Examiner's Signature _____ Initials <i>PR</i>		STATE OR COUNTRY GERMANY	SHEETS DRAWING 1	TOTAL CLAIMS 11  INDEPENDENT CLAIMS 1
<b>ADDRESS</b> 24972				
<b>TITLE</b> Basal finger joint implant				
<b>FILING FEE RECEIVED</b> 770	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	